## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1281118 C

								<u> 11</u>	<u>700</u>	0	86	
CLAIMS AS FILED - PART I (Column 1)						lumn 2)	SMA TYPI		NTITY	OF		R THAN
Ţ	OTAL CLAIM	125	22				TE	FEE		RATE	FEE	
FOR				NUMBER FILED		NUMBER EXTRA		C FEE	1		BASIC FE	
TOTAL CHARGEABLE CLAIMS			92,	22 minus 20=		· Q		9=		OF	1	7/
INDEPENDENT CLAIMS			3	3 minus 3 =		•		3=		OR	700	136
М	JLTIPLE DEP	ENDENT CLAIM	PRESENT	RESENT			+14	15=		<b>1</b>		<del>                                     </del>
* 1	the difference	ce in column 1 is	s less than	zero, enter	"0" in	column 2	TO			OR OR	L	R0-6
CLAIMS AS AMENDED - PART II												R THAN
		(Column 1)		(Colum	nn 2)	(Column 3)	SMA	SMALL ENTITY		OR		
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER SUSLY	PRESENT EXTRA	RAT	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
NON	Total <sub>.</sub>	*	Minus	**	·	=	X\$ :	9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus	***	CI AIM	-	X43	=		OR	X86=	
	7 11 10 1 7 11 20	ENTATION OF W	OLTIFLE DE	PENDENT	CLAIM		+145	5=		OR	+290=	
							TO ADDIT.	TAL		+	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	in 2)	(Column 3)	ADDIT.				ADDII. PEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	DENDENT C			X43	=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	=		OR	+290=	
		•					TO1		•	OR ,	TOTAL ADDIT, FEE	
		(Column 1)		(Column		(Column 3)		•	•			
		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R ISLÝ	PRESENT EXTRA	RATE	:  T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	ndependent	*	Minus	***		=	X43=	十			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+-		OR	∧00=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 2										OR	+290=	
# 1	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL DDIT. FEE	
TI	e "Highest Num	ber Previously Paid	For (Total or	Independent	is the h	o, enter 3. nighest number (	ound in the	approj	riate box			